

CentralPermitting@Harnett.org (910) 893-7525 ext:1 420 McKinney Pkwy (physical) PO Box 65 (mailing) Lillington, NC 27546

INDIVIDUAL TRADE APPLICATION

| CONSTRUCTION TYPE (circle one): Residential Non-Residential |
|---|
| SITE ADDRESS: 789 Sevenity Walk PKWY PIN: |
| LANDOWNER: JUSH + Laura Anzald Mailing Address: Same |
| LANDOWNER: JUSH + Laura Anzald Mailing Address: Same fuonay- City: Varing State: NC Zip: 27526 Phone: 443-243-40, Email: josh. anzaldua@gmail. |
| JOB COST (required): |
| DESCRIPTION OF WORK: Install water softener |
| Mechanical: New Unit With Ductwork □ New Unit Without Ductwork □ Gas Piping □ Other |
| Electrical: 200 Amp □ Greater than 200 Amp □ Service Change □ Service Reconnect □ Other |
| Plumbing: Water Tap/Sewer Connection Water Heater Number of Fixtures Other Water Softene |
| CONTRACTOR INFORMATION |
| * Must be owner or licensed contractor. Address, company name & phone must match information on license. |
| Contractor's Company Name |
| 505 S. New Hope Rd Stelle Raleigh NC info a motthewsplumbing. |
| Address |
| License # (*PLEASE USE THIS EMAILX |
| ekraske@ovcablnewater.com |
| Mechanical change outs & generator applications require both electrical & mechanical information. If applicable: |
| Contractor's Company Name Phone |
| Address Email |
| License # |
| I am the building owner or NC state licensed contractor, which legally entitles me to perform such work on the above structure. I attest that all work shall comply with the State Building Code and all other applicable State and local laws, ordinances an regulations. By signing this application, I affirm that I have obtained permission from the above listed license holder to purchase permits on their behalf. If doing the work as owner, I understand that I cannot rent, lease, or sell the listed proper for 12 months after completion of the listed work. |
| 1 I I I I I I I I I I I I I I I I I I I |
| Signature of Owner/Contractor Date |
| Signature of America Office Contractor Date |
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